

Esprit Orchestra invites you to...

# Shake your booty

with the

# Booty Smackers!

Toronto's Flyest Disco Band!

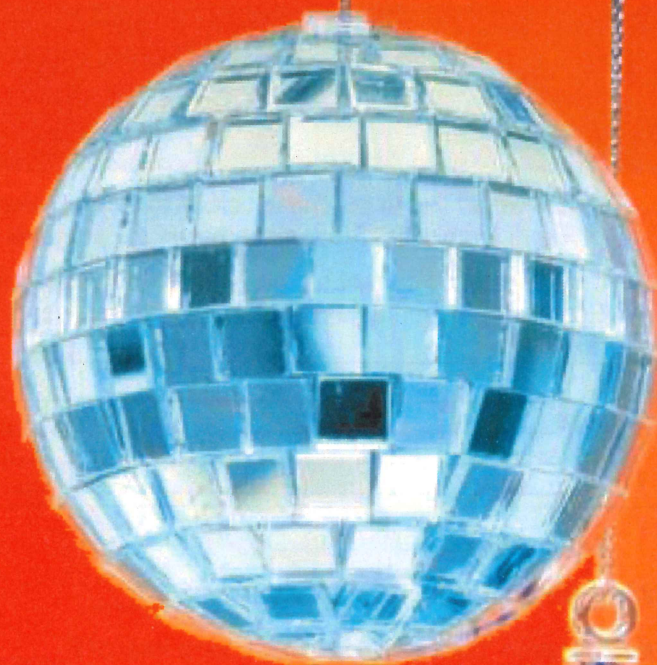
**The Great Hall**  
**1087 Queen Street West**  
**Friday May 26th, 2006**  
**7:30 'til late**

**Enjoy Disco Music & Dancing**  
**Cash Bar**  
**Fabulous Silent Auction**  
**Prizes for the Best Dance Moves**

**\$50.00 per person**  
**Patron ticket \$125.00 (tax receipt)**

**For tickets and information call 416-815-7887**  
**or e-mail [info@espritorchestra.com](mailto:info@espritorchestra.com)**

**Proceeds from this event will benefit the Esprit Orchestra**



Esprit Orchestra's **Shake Your Booty** with the **Booty Smackers**

The Great Hall, 1087 Queen Street West

Friday, May 26<sup>th</sup> 2006 – 7:30 pm 'til late

**Shake Your Booty with the Booty Smackers Event Ticket Order Form**

- ☐ Yes! I would like to purchase tickets to **Shake Your Booty** with the **Booty Smackers** in support of Esprit Orchestra. Please see below my personal information and payment details.
- ☐ Unfortunately, I cannot attend **Shake Your Booty** with the **Booty Smackers**, but I'd like to support Esprit with a charitable donation. Please see below for my personal information and payment details.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ e-mail \_\_\_\_\_

**Ticket order**

# \_\_\_\_\_ tickets at \$50 each, for a total of \$ \_\_\_\_\_

# \_\_\_\_\_ Patron Tickets at \$125 each, for a total of \$ \_\_\_\_\_. I understand I will receive a charitable tax receipt for a portion of this ticket price.

# \_\_\_\_\_ Sponsor-an-Artist tickets at \$50 each, for a total of \$ \_\_\_\_\_. I understand these tickets will be donated to a young artist or composer so that they may attend the event.

**Charitable Donation**

Please accept my donation of \$ \_\_\_\_\_. I understand that I will receive a charitable tax receipt for the full amount of this donation.

**Payment Information**

I have enclosed a cheque for the full amount of my ticket order/donation.

I wish to pay by Visa card

Card number \_\_\_\_\_ Expires \_\_\_\_\_

Signature \_\_\_\_\_

**THANK YOU!**

Return by mail to 174 Spadina Avenue, Suite 511, Toronto, ON, M5T 2C2  
or fax to **416-815-7337**